

AAPHD *Proposed* POLICY ON ACCESS TO DENTAL CARE

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Access is a term used to describe a broad set of concerns that center on the degree to which individuals and groups are able to obtain needed services from the health care system. The Institute of Medicine defines accessibility to care as “the ease with which a patient can initiate an interaction for any health problem with a clinician and includes efforts to eliminate barriers posed by geography, administrative hurdles, financing, culture, and language. A key test of access is equity and whether differences in the use and outcomes of health services result from financial or other barriers to care.

Dental care is not universally available for all populations in the U.S. Nationally, 47 million people do not have health insurance, and more than 100 million do not have dental insurance. In FY 2005, only 32.4% of children on Medicaid aged 0 - 20 received any dental service, 27.6% received any preventive dental service, and 16.3% received any dental treatment service. Unfortunately, few valid and reliable measures that encompass the diverse issues affecting access to care exist, and inequities between populations will continue to exist. Many individuals, including the elderly, homeless, those from low socioeconomic status families, racial, cultural, or linguistic minorities, homebound, migrant and seasonal workers, disabled populations, persons with HIV, the incarcerated, and very young children all have unique problems that act to further limit their access to oral health services.

Barriers affecting access to oral health services include an unawareness of the importance of oral health, cultural values and beliefs that do not promote healthy life styles, the episodic availability of prevention and routine care, a lack of health or dental insurance, state dental practice acts that restrict who can provide oral health services, the underutilization and underfunding of federal programs intended to increase access to oral health care, and a limited number of school-based health centers that provide routine dental services.

The American Association of Public Health Dentistry (AAPHD) supports and promotes the goal of equal access to oral health services for all populations, and believes the following principles are fundamental to attaining this goal. Strategies to improve access to care must:

- Be evidence-based and effective
- Reflect the fact that not all populations are at equal risk of developing oral disease
- Be characterized as addressing a community health problem, not a dental problem
- Be community-based
- Recognize the need for the involvement of non-dental personnel

Efforts aimed at increasing access to oral health services must also acknowledge that we must simultaneously increase awareness or how oral health integrates with overall health and well-being, and how we must increase the use of preventive health services in all populations.

AAPHD recognizes a number of current best practices and promising new strategies that have the potential to improve access to oral health services for all communities:

- Community-based prevention programs, e.g., community water fluoridation
- School-based and school-linked programs, e.g., sealant and fluoride varnish programs
- Expanded use of non-dental personnel, e.g., medical care providers providing oral health assessments and fluoride varnish applications
- Reform of publicly-financed health care programs, e.g., establishing market-based reimbursement policies in Medicaid
- Expanded use of new and emerging types of dental personnel, e.g., Alaska Dental Health Aide Therapist
- Strengthening the dental public health infrastructure, e.g., statutory authority for a state dental director
- Involvement of multiple partners, e.g., oral health coalitions in many states.
- Assuring that any efforts to increase access to health care through reforms to insurance programs include dental benefits commensurate with medical benefits.

AAPHD recognizes that health care providers have a moral obligation to heal the sick and infirm regardless of financial inequities. All individuals should have access to needed oral health prevention and treatment services as a basic moral right.